

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90389 048 ****61.25

DOCUMENT # N95000004629

1. Entity Name
C.A.U. CEDARS, INC.



Principal Place of Business
CEDARS OF BAYMEADOWS APARTMENTS
9801 BAYMEADOWS DRIVE
JACKSONVILLE, FL US

Mailing Address
1090 VERMONT AVENUE, N.W.
SUITE 400
WASHINGTON, DC 20005 US

40057441



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01042006 Chg-NP CR2E037 (11/05)

4. FEI Number
52-1949586

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
TALLAHASSEE, FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME BRYANT, JAMES S JR.
STREET ADDRESS 600 WHARFSIDE WAY
CITY-ST-ZIP JACKSONVILLE, FL 32207

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP ☐ Delete
NAME MEHRETEAB, GHEBRE S
STREET ADDRESS 1090 VERMONT AVENUE, N.W., SUITE 400
CITY-ST-ZIP WASHINGTON, DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DANFORD, JR., RICHARD D
STREET ADDRESS 1090 VERMONT AVENUE, NW, SUITE 400
CITY-ST-ZIP WASHINGTON, DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVS ☐ Delete
NAME WIEDORFER, JOSEPH P JR
STREET ADDRESS 1090 VERMONT AVENUE, N.W., SUITE 400
CITY-ST-ZIP WASHINGTON, DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Delete
NAME DANFORD, RICHARD D JR
STREET ADDRESS 233 W. DUVAL STREET, 14TH FLOOR
CITY-ST-ZIP JACKSONVILLE, FL 32256

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVPT ☐ Delete
NAME GOLLUB, RICHARD A
STREET ADDRESS 1090 VERMONT AVE., N.W., SUITE 400
CITY-ST-ZIP WASHINGTON, DC 20005

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Joseph P. Wiedorfer

JOSEPH P. WIEDORFER, VICE PRESIDENT

4/19/2006

202 789 5300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #